EMERGENCY MEDICAL SERVICES COUNCIL

City of Alexandria, Virginia

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Notes for consideration for the Strategic Planning meeting November 4, 2009

1. Firstly, one thing we all have in common is that we love this City. We all have our diffferent reasons, and some of the same reasons. One of those reasons we love Alexandria is because it is beautiful, we feel safe, and we feel that the City looks out for us. One way in which Alexandria looks out for its Citizens, Workers and Visitors is that it provides first-rate security services such as Emergency Medical Services and Fire Suppression.

In May 2009, Alexandria's Emergency Medical Services - EMS - received the award for the Outstanding EMS Service from the Northern Virginia EMS Council. It is now up for the Governor's Award. These accolades aside, Alexandria had the first professional EMS service in the US. It started in 1974. Prior to then, we and the nation had volunteer-staffed ambulances and firefighters who administered first aid and CPR.

Alexandria took the first leap in the country to professionalize its Emergency Medical Service by hiring and training full-time medics. It was a great leap, and one which has been followed around the country. Through the work of Alexandria's Operational Medical Director Dr. James Vafier, Alexandria's medics operate to the highest medical protocols in the nation (and probably the world). By the time our medics get a very sick patient to the hospital, that patient is stabilized. Not just transported with minimal care. I have ridden on our ambulances, and the procedures our medics do in the field, in unsanitary, and sometimes dangerous cercumstances (such as with traffic accidents or within violent domestic situations) are usually procedures only done in hospitals and in operating rooms.

Alexandria attracts medics from around the country, wanting to work here, because of its reputation for advanced medical protocols, and, after all, it is Alexandria, Virginia.

All of this, if we let it, is about to change.

There is a program planned, which the medics, and their unions, and the Citizens, if they knew it, would not want. It will diminish the level of medical practice our medics currently undertake to save lives. It is a program which has been instituted in DC, Fairfax, and Montgomery Counties, and has significantly diminished the level of ser-

vice in all those jurisdictions. It is widely known as the One and One Program, but it has been veiled under the name of FF-PM Service Enhancement in Alexandria.

The proposed new program would have one Advanced Life Support (ALS) provider and one FF/rescuer on each ambulance instead of the current goal of 2 ALS providers on each ambulance. It would put a fourth person on the fire trucks: a FF/rescuer. The idea is that a fire truck may be able to get to a scene of an EMS call before the ambulance because of the current shortage Alexandria has of ambulances. Of course, the FF/rescuer would not be able to give the same level of care as a full-time ALS provider, nor could the truck carry all the necessary equipment which is on an ambulance, nor can a truck transport a patient to the hospital.

- 2. Alexandria is currently short 3 EMS providers and 16 FFs. We need more ambulances, not fewer well-qualified advanced life support medics. A fourth person on the trucks with Paramedic (PM) training is a good idea but not at the expense of our Emergency Medical Services.
- 3. The future in Alexandria will put more demand than ever on the Emergency Medical Services. As new buildings are built to ever-increasing fire standards, demand for Fire trucks will diminish in contrast to the increasing demands of a growing population for Emergency Medical Services.
- 4. The Director of INOVA Alexandria Hospital's Emergency Dept., Dr Martin Brown, as well as the Hospital's CEO, Christine Candio, have voiced their concerns about instituting this program, which they know does not work.

In Conclusion:

The City of Alexandria has an Emergency Medical Service which is the envy of all who know of it. We got it right. Why change? Demand is increasing, population is increasing. We got it right. It works.